

Foster Family Home - Corrective Action Report

Provider ID: 1-180015

Home Name: Marissa T. Fernando, CNA

Review ID: 1-180015-6

94-1007 A Hiapo Street

Reviewer: Maribel Nakamine

Waipahu

HI

96797

Begin Date: 2/5/2021

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Recertification inspection for a 3 person CCFFH completed.

Corrective Action Report issued during CCFFH inspection with a written plan of corrections due on 3/5/2021.

Foster Family Home	Background Checks	[11-800-8]
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8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

8.(a)(2) Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

8.(a)(1), (2)- No APS/CAN/Fingerprinting present for HHM#2 and HHM#3 in the CCFFH binder.

Foster Family Home	Information Confidentiality	[11-800-16]
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16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5)- No confidentiality policies and procedures and client privacy rights training present for HHM#2 and HHM#3 in the CCFFH binder.

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(b)(6) Comply with all applicable federal, state, and county laws, ordinances, rules, regulations, and regulatory requirements, including but not limited to statutes that prohibit discrimination against any person, on the grounds of race, color, national origin, religion, creed, sex, age, marital status, or handicap;

41.(f)(1) Tuberculosis clearances that meet department of health guidelines; and

Comment:

41.(b)(6)- Noted a sealed/boarded/drywalled door inside Client #1's bedroom and per CG#1, there's another family renting on the other side with a separate entrance. Sealed door may or may not be properly permitted with Department of Planning & Permitting.

41.(f)(1)- No TB clearances present for HHM#2 and HHM#3.

Foster Family Home	Physical Environment	[11-800-49]
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49.(c)(3) The home shall be maintained in a clean, well ventilated, adequately lighted, and safe manner.

Comment:

49.(c)(3)- Client #1, Client#2, and Client #3's bedroom window screens were with multiple holes and loose latches. Insects/bugs/mosquitoes can come in through the holes and might possibly bite the clients.

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Quality Assurance

[11-800-50]

50.(e)

The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

Comment:

50.(e)- No intercom/buzzer/bell outside of the CCFFH's gate for CTA/agency to quickly access CCFFH. Also noted that there were dog signs posted on the gate.

Mariabel Oskamire, RN 2/5/2021

Compliance Manager

Date

altfer
Primary Care Giver

Date

2/5/2021